REC 16-009

REC Eligibility Application Result #Rebecca Courser

Sat 12/26/2015 12:17 PM
From: "Barbara.Bernstein@puc.nh.gov"
To: linda@knollwoodenergy.com

Please print two physical copies of this message and mail them to:

Debra Howland, Executive Director
Public Utilities Commission of New Hampshire
21 S. Fruit Street
Concord, NH 03301

NHPUC 31DEC'15PM1:07

Reference #	5765122
Status	Complete
Login Username	linda modica
Login Email	linda@knollwoodenergy.com
Who is submitting this request? *	Aggregator
Aggregator Batch Number *	KN0115
Aggregator name *	Knollwood Energy
Aggregator's Email Address *	linda@knollwoodenergy.com
Facility Owner Name *	Rebecca Courser
Owner Prefix *	Ms.
Facility Owner email *	R_Cook@mcttelecom.com
Facility Address *	374 Shoodac Rd
Facility Town/City *	Warner
Facility State *	NH
Facility Zip *	03278

Is the facility address the same as the owner's mailing address *	Yes
Primary Contact (who should we call with questions) *	Linda Modica
Use Aggregator Email Address? *	Yes
Utility *	Other
Other Utility Name *	PSNH
Date of Utility Signoff *	07/24/2014
GIS ID *	NON55422
Panel Make *	SunEdison
Panel Model *	F270
Panel Rated Output *	270
Panel Quantity *	40
System capacity based on panels	10800.00
Inverter Make *	Enphase Energy
Inverter Model *	M250
Rated Output *	250
Inverter Quantity *	40
System capacity based on inverters	10000.00
System capacity in kW as stated on the interconnection	10.0

agreement	
Revenue Grade Meter Make *	AEE Solar
Was this facility installed directly by the customer (no electrician involved)? *	No
Sign-off Electrician's License Number	13363M
Installation Company *	SunRay Solar
Independent Monitor Name *	Paul Button
Monitor Company Name *	Energy Audits Unlimited
Is the installer also the equipment vendor? *	No
Equipment Vendor *	SunEdison
Please attach your completed interconnection agreement including Exhibit B.	Courser_SPIA.pdf (163k) (https://fs30.formsite.com/jan1947/files/f-5-99-5765122_6wGvSMfe_Courser_SPIA.pdf)
Please attach additional document here	Courser-Cook_NHOS.pdf (136k) (https://fs30.formsite.com/jan1947/files/f-5-168-5765122_Q1MajGje_Courser-Cook_NHOS.pdf)
Aggregator statement of accuracy Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer. *	
Print Name *	Alexa Modica

Date Signed *	12/26/2015
Last Update	2015-12-26 11:07:20
Start Time	2015-12-26 11:01:51
Finish Time	2015-12-26 11:07:20
IP	98.221.34.56
Browser	Safari
OS	Mac
Referrer	https://fs30.formsite.com/res/formLoginReturn (https://fs30.formsite.com/res/formLoginReturn)

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JUL 24 2014
SESD

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE
INTERCONNECTION STANDARDS FOR INVERTERS
SIZED UP TO 100 KVA
Simplified Process Interconnection Application and Service Agreement

PSNH Application Project ID#: N3069

Contact Information:

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)

Customer or Company Name (print): Rebecca Courser

Contact Person, if Company: _____

Mailing Address: 374 Schoodac Rd

City: Warner State: NH Zip Code: 03278

Telephone (Daytime): (603) 456-3997 (Evening): _____

Facsimile Number: _____ E-Mail Address: r_cook@mcttelecom.com

Alternative Contact Information (e.g., System installation contractor or coordinating company, if appropriate):

Name: SunRay Solar, LLC

Mailing Address: 249 Loudon Rd

City: Concord State: NH Zip Code: 03301

Telephone (Daytime): (603) 225-6001 (Evening): _____

Facsimile Number: _____ E-Mail Address: justin@spreadthesunshine.com

Electrical Contractor Contact Information (if appropriate):

Name: Shawn Marvel

Mailing Address: 108 Sunapee St #C

City: Newport State: NH Zip Code: 03773

Telephone (Daytime): (603) 209-4364 (Evening): _____

Facsimile Number: _____ E-Mail Address: marvel@inbx.com

Facility Site Information:

Facility (Site) Address: 374 Schoodac Rd

City: Warner State: NH Zip Code: 03278

Electric

Service Company: PSNH Account Number: 56837941046 ✓ Meter Number: W15226224 ✓

Account and Meter Number: Please consult an actual PSNH electric bill and enter the correct Account Number and Meter Number on this application. If the facility is to be installed in a new location, please provide the PSNH Work Request number.

PSNH Work Request # _____

Non-Default' Service Customers Only:

Competitive Electric

Energy Supply Company: _____ Account Number: _____

(Customer's with a Competitive Energy Supply Company should verify the Terms & Conditions of their contract with their Energy Supply Company.)

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE
INTERCONNECTION STANDARDS FOR INVERTERS
SIZED UP TO 100 KVA

Simplified Process Interconnection Application and Service Agreement

Facility Machine Information:

Generator/
Inverter Manufacturer: Enphase Model Name & Number: M250 Quantity: 40
Nameplate Rating: 250 (kW) _____ (kVA) _____ (AC Volts) Phase: Single ✓ Three

Nameplate Rating: The AC Nameplate rating of the individual inverter.

10KW AC OUTPUT

System Design Capacity: 10.6 (kW) _____ (kVA) Battery Backup: Yes No ✓

System Design Capacity: The system total of the inverter AC ratings. If there are multiple inverters installed in the system, this is the sum of the AC nameplate ratings of all inverters.

Net Metering: If Renewably Fueled, will the account be Net Metered? Yes ✓ No

Prime Mover: Photovoltaic ✓ Reciprocating Engine Fuel Cell Turbine Other _____

Energy Source: Solar ✓ Wind Hydro Diesel Natural Gas Fuel Oil Other _____

Inverter-based Generating Facilities:

UL 1741 / IEEE 1547.1 Compliant **(Refer To Part Puc 906 Compliance Path For Inverter Units, Part Puc 906.01 Inverter Requirements)**
Yes ☑ No ☐

The standard UL 1741.1 dated May, 2007 or later, "Inverters, Converters, and Controllers for Use With Independent Power Systems," addresses the electrical interconnection design of various forms of generating equipment. Many manufacturers choose to submit their equipment to a Nationally Recognized Testing Laboratory (NRTL) that verifies compliance with UL 1741.1. This term "Listed" is then marked on the equipment and supporting documentation. ***Please include, any documentation provided by the inverter manufacturer describing the inverter's UL 1741/IEEE 1547.1 listing.***

External Manual Disconnect Switch:

An External Manual Disconnect Switch shall be installed in accordance with **'Part Puc 905 Technical Requirements For Interconnections For Facilities, Puc 905.01 Requirements For Disconnect Switches and 905.02 Disconnect Switch.'**
Yes ☑ No ☐

Location of External Manual Disconnect Switch: Next to meter.

Project Estimated Install Date: July Project Estimated In-Service Date: July ✓

Interconnecting Customer Signature:

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the **Terms and Conditions for Simplified Process Interconnections** attached hereto:

Customer Signature: [signature] Title: Homeowner Date: 7/23/14

Please include a one-line and/or three-line diagram of proposed installation. Diagram must indicate the generator connection point in relation to the customer service panel and the PSNH meter socket. Applications without such a diagram may be returned.

For PSNH Use Only

Approval to Install Facility:

Installation of the Facility is approved contingent upon the Terms and Conditions For Simplified Process Interconnections of this Agreement, and agreement to any system modifications, if required.

Are system modifications required? Yes ☐ No ☑ To be Determined ☐

Company Signature: [signature] Title: SR. ENGINEER Date: 7-24-14

Public Service Company Of New Hampshire
Interconnection Standards For Inverters Sized Up To 100 kVA
Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information: ☐ Check if owner-installed

Customer or Company Name (print): Rebecca Courser (Fred W. Course)

Contact Person, if Company: _____

Mailing Address: 374 Schoodac Rd

City: Warner State: New Hampshire Zip Code: 03278

Telephone (Daytime): (603) 456-3997 (Evening): _____

Facsimile Number: _____ E-Mail Address: r_cook@mcttelecom.com

Facility Information:

Address of Facility (if different from above): _____

City: _____ State: _____ Zip Code: _____

Electrical Contractor Contact Information:

Electrical Contractor's Name (if appropriate): Shawn Marvel

Mailing Address: 249 Loudon Rd

City: Concord State: New Hampshire Zip Code: 03301

Telephone (Daytime): (603) 209-4364 (Evening): _____

Facsimile Number: _____ E-Mail Address: shawn@spreadthesunshine.com

License number: 13363 M

Date of approval to install Facility granted by the Company: _____

PSNH Application ID number: #N_____

Inspection:

The system has been installed and inspected in compliance with the local Building/Electrical Code of:

City: _____ County: _____

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection):

Signature: _____

Name (printed): _____ Date: _____

Customer Certification:

I hereby certify that, to the best of my knowledge, all information contained in this Exhibit B – Certification of Completion is true and correct. This system has been installed and shall be operated in compliance with applicable standards. Also, the initial start-up test required by Puc. 905.04 has been successfully completed.

Customer Signature: Rebecca J. Course

As a condition of interconnection you are required to send/fax a copy of this form to :

Public Service Company of New Hampshire
Supplemental Energy Sources Department
780 North Commercial Street
P. O. Box 330, Manchester, NH 03105-0330
Fax No.: (603) 634-2449

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Rebecca L. Courser

Printed Name of signature owner

Rebecca L. Courser

Rebecca L. Courser (Sep 14, 2015)

Signature of system owner